## **Town of Webster - Application for Peddlers License**

Please print legibly						
Applicant Name: Address (No PO Box):						
City, State, Zip:						
Years/Months At Address:	Phone:					
Previous Legal Address (If less than	2 years at addre	ss above):				
Temporary Address (If not a local re	esident):					
How long will this permit be needed	d (If less than 3 m	onths):				
Business Name:						
Business Address:						
Supervisor:		Phone:				
Product/Service Description (Attach	Brochure):					
Description of vehicle to be used for	r business:					
Vehicle License Plate:		State:		Vehicle Owner:		
Applicant's Physical Description:	Ha	ir Color:			Eye Color:	
Age:		Height:			Weight:	
	410					
Company Filed with Fair Business Council? Individual Filed with Fair Business Council?			yes	no		
Convicted of a Felony or Misdemeanor**?			yes yes	no no		
I understand that I may not begi my Peddler Permit with me at al	n soliciting until I Il times while soli	have receiv	ed my Pe	ddler's Per	essing Fee per individual is non-refundable rmit, and that if approved I argee to carry t my permit may be grounds for refusal or Date:	
_			-		lication & must have been obtained within six (6) erk reserves the right to request additional	
		Office	Use Only	,		
Fee		Ojjice	USE UTITY		Date Company	
Collected:Reference #		Cleri	k Initials:		Processing Fee Paid:	
Town Clerk Approval Date & Initials.	:	Permit #			Date Picked Up:	
Expiration Date:		Date Poste	d to Web	site:		
Notes:						
WPD Background Check:	Note: This permit is issued for a three month period or less. A fee of \$30 for each additional month may be applied for before the initial permit expires.					
	Lost permits:	Lost permits: Additional fee of \$50.00 for replacement.				